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The Invisible People: How the U.S. Has Slept Through the Global AIDS Pandemic, The Greatest Catastrophe of Our Time

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This is what we know about global AIDS today:

- Over the past 20 years, 60 million people have become infected with HIV; already more than 20 million people have died of AIDS – that is more than all the battle-deaths of all the wars in the 20th century combined
- Some countries in Southern Africa have adult-infection rates as high as 40% - soon 2 in 5 adults will die of AIDS
- Everyday 8,000 people die of AIDS – 3 times 9/11’s death toll
- Some African leaders have spoken of the “extinction” of their people. In Africa, a generation of adults is disappearing, and a generation of orphans is being left in their wake.
 - By 2010, it is likely that there will be 25 million AIDS orphans – that is all of the children under 7 years of age in the entire United States

During my research, I learned that AIDS is preventable and it is treatable. It’s worked in Uganda, Brazil and Thailand. We know how to stem the epidemic. I came to think of this as the defining moral challenge of our time. I believe that this is our Holocaust.

My reflex was to ask a question: What have we done about it? What has the world's wealthiest, mightiest, most advantaged country done to address perhaps the greatest threat known to mankind?

The book, entitled, *The Invisible People* is my answer to that question. It's a story. The narrative is weaved around the people who have been at the forefront of this crisis. They are Presidents, public health officials, thinkers, diplomats and activists. It's a story of tragic missed opportunities, but also of heroes and visionaries who sacrificed much to wake the world from its slumber. The story is about politics and policy, but ultimately, it's about human beings – about the choices that they have made.

I believe that there has never been a more important time to consider the history of our failed response. We now reside at a profoundly seminal juncture in the world's response to this pandemic. Africa is in desperate need of resources and attention. And, AIDS is now poised to explode in India, China and Russia, the so-called “next wave” countries. Tens of millions, maybe hundreds of millions, of lives hang in the balance. The history is replete with lessons that can help to inform the present and help to chart a better course forward.

Among those profiled in the book is Yoweri Museveni. He was a military man who had just come to power in Uganda, when in 1986 the calls first started trickling in. For years, Uganda's troops had been trained in Cuba. But, now they were being sent home. Castro and Cuban officials sighted incidence of a strange and lethal disease. His regime's standing was still precarious, and Museveni knew that his political survival was bound to the strength of his military. Almost immediately, Museveni launched the most ambitious and comprehensive national campaign against AIDS in African history. His leadership would yield results. Uganda's adult HIV infection rate dropped from over 20% to around 5% - a decline of several multiples. It wasn't the humanitarian dimension that moved Museveni. It wasn't a moral impulse. It was a calculated interest-based assessment. And it was under-girded by a visionary insight: that a disease can constitute a threat to national security.

The pandemic is the greatest humanitarian catastrophe of our time. But it's something more as well. Global AIDS poses a vital threat to U.S. national security. *The Washington Post* has called global AIDS “perhaps the most underestimated enemy of all-time.” Colin Powell recently declared that

global AIDS is “the greatest weapon of Mass Destruction on earth.” It is the security dimension of the crisis on which I’d like to focus this evening. I believe that there are at least seven important reasons why the crisis demands consideration as a threat to our national security. Thus far, AIDS has reaped its greatest toll in sub-Saharan Africa. And it is in the sub-continent that the pandemic presents the most immediate threat to U.S. national security.

1. AIDS will reverse trends in democratization. The spread of stable liberal democracies is a vital U.S. strategic imperative. Roughly one-quarter of the world’s 190 nation-states are in Africa. Africa was host to a wave of democratization in the 1990s. AIDS is now beginning to tear asunder the social and economic foundations upon which democratization in Africa depends.

One Executive Mayor told me that within a few years, it was possible that her entire region, about 1 million in population, would be either unemployed, infected with AIDS or employed to care for people with AIDS: an AIDS economy. The World Bank has predicted that in South Africa (Africa’s richest and most important economy) because of AIDS, within several generations, economic collapse is a possibility.

Civil society’s leaders, lawyers, doctors, government officials and teachers, are being claimed. Compounded by acute poverty and other health crises, their loss generates ripple effects throughout communities and societies. The combination of economic deterioration and the toll on irreplaceable citizens is devastating civil society and key state institutions. As a consequence, Africa’s hardest hit countries will find the prospect of stable liberal democracy illusory. Autocrats, warlords and even rogue leaders will fill the vacuum. About a year ago, a reporter asked Bill Clinton which he thought was a greater threat to U.S. national security, terrorism or global AIDS. Clinton didn’t say terrorism, he said they were different. His reason was that AIDS would undermine democracy in Africa and elsewhere.

2. The disease will precipitate conflict. AIDS is reducing life expectancy by decades, creating an aura of fatalism and despair, in which many are living for today’s advantage as opposed to tomorrow’s promise. As mentioned, the disease is creating a new generation of orphans. Reared without moral guidance or personal security, AIDS orphans, it has been said, “constitute an army in search of a leader.” Children have been recruited into

all of Africa's wars in the last decade. With the breakdown of political and economic security, all of these ingredients are bound to create a cauldron of instability. Conflict, local, civil and regional, is likely to ensue.

American interests will be at stake as never before. The United States now imports roughly 15% of its foreign oil from Africa. By 2010, that number is projected to increase to 25%. Even as our economic stake increases, African states' ability to secure themselves will decline dramatically in the years ahead. Some African militaries, it is believed, have HIV infection rates as high as 50%. Incidence levels in Sub-Saharan African militaries of 30% are believed to be the norm. With its military capacity eviscerated, Africa, alone, will not be capable of managing its own conflicts or keeping peace once conflict subsides. Driven by our moral obligation and our economic interests, the United States will be increasingly compelled to send in military forces and peacekeepers at a greater scale and with greater frequency.

3. Most perilously, the disease will produce conditions in which Africa will become both a breeding ground and a harbor for terrorists.

Perhaps the greatest danger to U.S. national security resides in the potential emergence of failed states. In 2002, the White House National Security Strategy made a revolutionary proclamation: for the first in our nation's history, the document said, "weak" states pose a greater danger to our national security than "strong" states. So, we are compelled, then, to ask: What today is making states weak?

Amongst the roughly 40 nation-states in sub-Saharan Africa, it is a combination of forces, but perhaps more than any other, it's AIDS. In places like Somalia, Sudan and Kenya, Africa has already provided succor for terrorists focused on inflicting harm upon America. Black markets in which diamonds and arms serve as the perfect fungible currency for transnational criminals will be increasingly hard to police. As the disease quietly tears states apart, allowing lawlessness and disorder to prevail, terrorists on the run may find refuge and sustenance in the rubble.

There are more Muslims in Africa than in the entire Middle East. To date, Islamic radicalism is not wide-spread in Africa. However, the suffering, vulnerability, want and social dislocation that AIDS is reaping throughout the continent will help inflame radicalism, potentially breeding a new cadre of terrorists. In Afghanistan the world saw the danger of a failed state. In Africa, the world confronts the potentiality of a failed sub-continent.

In the next several years, India, China and Russia, the so-called “next wave” countries, will most likely overtake Southern and Central Africa as the new epicenter of the disease. A cover story in *Foreign Affairs* predicted that at our current trajectory, within 20 years, there may be as many as 200-250 million newly infected people in these 3 countries alone. The disease will have seismic reverberations on global economic and political stability.

4. AIDS will Pummel Russia at its Tipping Point. In Eurasia, the security peril is greatest in Russia, where AIDS is growing faster than anywhere else in the world. There are roughly 1 million infections in Russia, and that number is expected to climb to 5-8 million by 2010. Russia’s population of around 145 million is already predicted to decline by tens of millions in the next several decades due to demographic trends. One former Secretary of State described Russia as “a demographic wasteland.” The prospect of 5 to 8 million new infections on top of existing challenges will create incredible economic and social pressures on Russia, during an extremely delicate moment in Russia’s tenuous democratic transition. Moreover, Senator Kerry has recently said that securing nuclear weapons and material would be his number one foreign policy priority. Of course, our Cold War enemy is still housing thousands of nuclear weapons and huge stocks of nuclear materials. Russia is struggling to safeguard those weapons from terrorists and rogue leaders. AIDS will create pressures on economic and state capacity that will further denigrate its ability to do so.

5. India Could Be the Next Africa. To Russia’s south, India will soon become the country with the most absolute numbers of infections in the world. Its HIV-infection toll now hovers at around 5 million, and by 2010 that number may skyrocket to 20-25 million. India, in many ways, is Africa 5 to 10 years ago. With large swaths of migrant laborers, a pulsing market for prostitution, an almost skeletal health infrastructure and elites that are in a mind-boggling state of denial, AIDS is poised to explode to Africa-like proportions. India is the world’s largest democracy, a nuclear power, and a key U.S. strategic ally in a highly volatile region increasingly important to U.S. security interests. AIDS now places India on the precipice of a crisis that threatens to induce untold instability. U.S. security will suffer with India’s slide.

Global AIDS must be considered in the context of our national security in at least 2 more ways.

6. Our Moral Authority Matters. Our ability to get other countries to go along with us, and to share the burden, rests not only on their own self-interests, but, in their perception of America's legitimacy and moral authority.

It matters in another important way. We derive our strength and our security from our global system, underpinned by free-market enterprise, economic integration and the norm of political liberty. Because of America's might and reach, to much of the rest of the world, this system has an American face. Our moral authority, therefore, will have a direct bearing on other countries' willingness to opt-in to this system, and thus the viability of the system that provides our strength and security. In large measure, our moral authority is judged by how responsive we are, how responsive our system is, to the needs and aspirations of all of the world's peoples. And there is no need or aspiration more elemental than life.

We are fighting, or involved, in two wars. But, it's also been said that we are waging a war of ideas. A foreign policy expert recently suggested that if we are to win this war of ideas, we must spend less time brandishing the "argument of our power" and more time advancing the "power of our argument." We have the means and the competency to prevent tens of millions of needless deaths, to extend tens of millions of lives, and to safeguard the world from immense misery and instability. The power of that American argument is unassailable.

7. The pandemic represents an opportunity. Global AIDS is a global threat. The U.S. should work with its international partners to formulate a global strategy. In this sense, global AIDS exemplifies the type of threat and challenge through which we might begin to re-build our transatlantic community, and ideally work towards fostering a greater sense of global community. Terrorism, the proliferation of weapons of mass destruction and environmental challenges all constitute threats to our national security, and they are all transnational in nature. The remedies to these common threats can only be found in co-operative efforts. Global AIDS is an example, and it could be a catalyst.

So, is global AIDS a humanitarian issue, or is it a security issue? With some consideration it becomes clear that it is both. Should we lack the vision and

imagination to conceptualize this threat in all of its dimensions, we will find ourselves needlessly imperiled and our world a much more dangerous place. The good news is that it needn't be so. First, I think we must consider a historical insight. *The Invisible People* reveals that in some respects, the world has been 10-years behind the curve in its response.

In 1993, at the International AIDS Conference in Berlin, Michael Merson, head of the Global Program on AIDS at the World Health Organization, shared a simple plan. With \$2.4 billion from the entire international donor community, we could cut in half the number of new infections projected for the next 10 years. It was a non-starter. Funding didn't move, no one got behind it, no country championed it and Merson himself did not advocate for it forcefully. Let us fast-forward ten years. The U.S. alone is now spending what Merson asked of the entire global community. But, it is ten years too late. And we are now at a similar juncture.

In January 2003, President Bush announced an Emergency Plan for AIDS Relief. It called for \$15 billion over five years. The goals are to prevent 7 million new infections, to provide treatment for 2 million people and to care for 10 million people. It is a historic initiative and if executed well, it could help save millions of lives. Yet, it is an Emergency Plan, not a viable, long-term strategy. Even as the plan moves to treat 2 million people and prevent 7 million new infections, experts predict tens of millions of new infections during that five year period. So, even with this Emergency Plan, it is likely that the world will wake up in five years and realize that we are a lot worse off than we were at the beginning. In part, the culprit will be the myopia, the shortsightedness that has plagued the global response from the beginning.

Now more than ever, it is imperative to get ahead of that curve. Africa is in desperate need of resources and attention and there is so much that we can do to pre-empt the pandemic's explosion in Eurasia. A viable, long-term strategy will require five elements in addition to the Emergency Plan now in place.

First, it must be global. The U.S. is now pursuing a go-it-alone approach. This is a global crisis. The U.S. cannot solve it alone, and we should not have to. There are now a plethora of countries, international institutions and private donors with their own agendas. The net result will be fragmentation, duplication and incoherence. We must lead a cohesive international effort under the umbrella of a global strategy with shared goals, a concerted

approach, and one global budget and timeline. What the world now needs most is what we have never had: a viable long-term global strategy to defeat perhaps the greatest threat now known to mankind.

Second, even as we move with an emergency approach, we must move in parallel to build sustainable health infrastructure in the developing world. The WHO estimates that for a commitment that would essentially boil down to the price of two or three movie tickets per American per year, we could begin to save 8 million lives per year, which would in turn generate an additional \$200 billion in economic output per year -- Two or three movie tickets per American per year for 8 million lives.

Three, the only thing capable of ending the pandemic outright is an AIDS vaccine. More resources and legislative incentives must be committed, well beyond the initiative launched at the recent G8 Summit.

Fourth, global AIDS must command a much greater degree of Presidential and Cabinet level diplomatic priority. Armed with the carrot of increased resources as well as the stick of international censure or penalties, if need be, it will make a big difference.

Finally, a wider base of popular support and pressure will be necessary. A friend of mine who works for an international institution recently met with a Congressman to make his case. The Congressman told him that he gets it, and he wants to help, but he said, "If I'm being candid, your ability to get me to do what you want me to do will depend on your ability to get my constituents to tell me to do it." Governments must lead. But, if our leadership is remiss, it is because we are letting them be remiss.

The numbers are truly staggering. One can drown in them, or become numb. But, then we remember that each number is a person, a story, an indignity, an indignity we share for letting it happen. AIDS is a political challenge, it is a policy issue, and it is an economic and security threat, but at its essence it is a human tragedy. The pandemic is asking us some old questions: Are we willing to look at what is far away and what is painful to see? Will we act? Or will we allow empty sympathy and incrementalism to remain the virus' greatest ally? It is also asking us a new question: Will we learn from the lessons of history to meet the crisis in Africa and the impending calamity in Eurasia?

Above all, I believe it is providing us with an opportunity. We possess the means and the competencies to curb this pandemic. And if we do that, we will affirm for our time, and for all time, that we refused to be bystanders to our generation's greatest human tragedy. The threat is perilous and the challenge is daunting. But the opportunity is extraordinary.

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